

## **Iowa Department of Human Services**

Terry E. Branstad Governor

Kim Reynolds Lt. Governor Charles M. Palmer Director

April 3, 2014

Karla Alder 212 So. School St. St. Ansgar, IA 50472

Dear Child Care Provider,

This letter is in regards to the April 2, 2014 compliance check of your Level B, Registered Child Development Home. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

,	
$\square$ 110.5(1)m Has not less than one 2A 10BC rated fire extinguisher in a visible and readily place on each child-occupied floor. (upstairs)	accessible
$\  \  \  \  \  \  \  \  \  \  \  \  \  $	
$\Box$ 110.5(1)q All dogs and cats have annual examinations. Records of the exams are on file verify that routine immunizations are current and animal is free of endo and ecto parasite.	
110.5(2) A provider file is maintained and contains:	
110.5(2)a A physician's signed statement of health and immunization status on the pro- all members of the household who may be present when children are in the home. Stater must be obtained at the time of initial registration and updated every two years. (husband	ments
Non-compliance with any of the mandated regulatory requirements listed above may lead to t cancellation or revocation of your Child Development Home Registration. Please take whatever enecessary to completely address each of the violations noted above. It is essential you completely address each of the violations noted above.	er steps
above-mentioned violations within the next 45 days.	
Based on the items out of compliance listed above, a recheck or follow up visit to your hom necessary. However, it is essential you provide documentation to the Department that certificative corrected each of the identified regulatory violations and are now in complete compliance Departmental regulatory mandates. Please check mark each of the boxes listed above when necessary corrections have been completed. By doing so, you certify that you have complete the mandated regulatory requirements contained within each identified section.	es you ce with all the
certify that I have taken all of the steps necessary to correct each of the identified violation	s noted

above and am now in complete compliance with all of the Departmental mandated regulatory rules.

## Page 2

## Please sign and date below, and return this form in the provided envelope by:

X	
Signature	Date
Please do not hesitate to contact me at DHS at 641 letter.	-421-1219 if you have any questions regarding this
Sincerely,	
Amanda Nash Social Worker II	
Always Remember:	

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 641-394-4854.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child\_Care/Professional\_Development.html and you can sign up for training at https://ccmis.dhs.state.ia.us/trainingregistry/

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).